

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ILLINOIS

Sahar Elmi	ihi	AUG 1 4 2024 N		
Plaintiff(s)		THOMAS G. BRUTON Case Number: CLERK, U.S. DISTRICT COURT		
v. Sinova US	A Inc.) 1:24-cv-07241		
Defendant	(s	Judge Jeffrey I. CummingsMagistrate Judge Heather K. McShain RANDOM / CAT 2		
(NC		ORNEY REPRESENTATION ms may result in the denial of this motion.)		
≡ I	I, <u>SAHAR ELMIHI</u> , declare that I am the (check appropriate box) plaintiff defendant in this case and that I am unable to afford the services of an attorney. I hereby ask the Court for an attorney to represent me in this case.			
(NC Del Dis but	I declare that I have contacted the following attorneys/organizations seeking representation: (NOTE: This item must be completed.) DeBlasio Law Group LLC Disparti Law Group but I have been unable to find an attorney because: To accept my case and my financial hardship			
3. I de (<u>No</u> ✓ OR	I am not currently represented criminal or civil case.	by an attorney requested by the Court in any federal an attorney requested by the Court in a federal criminal bed on the back of this page.		
(Ea ✓ OR	federal criminal or civil case. I have previously been represer	resented by an attorney requested by the Court in any inted by an attorney requested by the Court in a federal is described on the back of this page.		
4. I de ✓	clare that (check one): I have attached an original App detailing my financial status.	pplication for Leave to Proceed In Forma Pauperis		

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		I have previously filed an Application for Leave to Proceed In Forma Pauperis in this case, and it is still true and correct.				
		I have previously filed an Application for Leave to Proceed In Forma Pauperis in this case. However, my financial status has changed and I have attached an Amended Application to Proceed In Forma Pauperis to reflect my current financial status.				
5.	\checkmark	I declare that my highest level of education is (check one):				
		☐ Grammar school☐ Some college	☐ Some high school ☐ College graduate	☐ High school graduate ☐ Post-graduate		
6.	\checkmark	I declare that my ability to speak, write, and/or read English is limited because English is not my primary language. (Check only if applicable.)				
7.		I declare that this form and/or other documents in this case were prepared with the help of an attorney from the U.S. District Court Pro Se Assistance Program. (Check only if applicable.)				
8.	\checkmark	I declare under penalty of perjury that the foregoing is true and correct.				
9-91. M. 123 Springbrook Trail						
Signature of Movant			Street Address			
Augus	st 5 2024	4	Oswego, IL 60543			
Date			City, State, Zip			
Other cases in which an attorney requested by this Court has represented me:						
Case N	Name: _		Case No	o.:		
Attorney's Name: This case is still pending \(\square \) Yes \(\square \) No						
The appointment was limited to settlement assistance: ☐ Yes ☐ No						
Case N	Name: _		Case No	o.:		
Attorn	ey's Na	ime:	This case is still pending	g □ Yes □ No		
The appointment was limited to settlement assistance: ☐ Yes ☐ No						
Case Name: Case No.:						
Attorn	ey's Na	ıme:	This case is still pending	g □ Yes □ No		
The appointment was limited to settlement assistance: ☐ Yes ☐ No						

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